

Unsworn Declaration Under Penalty of Perjury for Amended Schedule(s)

I declare under penalty of perjury that the information provided in the foregoing amended schedule(s) listed here:

is true and correct.

/s/ Misbah Zmily

Debtor signature

Name(print): Misbah Zmily

Date: July 23, 2023

Joint debtor

Name(print):

Date: July 23, 2023

Federal Rule of Bankruptcy Procedure 1008

Verification of Petitions and Accompanying Papers All petitions, lists, schedules, statements and amendments thereto shall be verified or contain an unsworn declaration as provided in 28 U.S.C. §1746.

28 U.S.C. § 1746

Unsworn declarations under penalty of perjury

Wherever, under any law of the United States or under any rule, regulation, order, or requirement made pursuant to law, any matter is required or permitted to be supported, evidenced, established, or proved by the sworn declaration, verification, certificate, statement, oath, or affidavit, in writing of the person making the same (other than a deposition, or an oath of office, or an oath required to be taken before a specified official other than a notary public), such matter may, with like force and effect, be supported, evidenced, established, or proved by the unsworn declaration, certificate, verification, or statement, in writing of such person which is subscribed by him, as true under penalty of perjury, and dated, in substantially the following form:

(1) If executed without the United States: "I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on (date). (Signature)".

(2) If executed within the United States, its territories, possessions, or commonwealths: "I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct. Executed on (date). (Signature)".

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW MEXICO

In re: **La Familia Primary Care, P.C., a New Mexico
Professional Corporation**

Case No. **23-10566-t11**

Debtor.

Plaintiff,

Adv. Pro. No.

v.

Defendant.

Pursuant to Fed. R. Bankr. P. 7007.1(a), the undersigned identifies the following corporations (other than governmental units), that directly or indirectly own 10% or more of any class of the undersigned's equity interests:

None [Check if applicable]

Date: July 23, 2023

CORPORATION

By: _____
Signature
Name: _____
Title: _____

United States Bankruptcy Court
District of New Mexico

In re **La Familia Primary Care, P.C., a New Mexico Professional Corporation**
Debtor(s)

Case No. **23-10566-t11**
Chapter **11**

BUSINESS INCOME AND EXPENSES

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ **1669617.00**

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income \$ **147680.00**

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor) \$ **70000.00**

4. Payroll Taxes _____

5. Unemployment Taxes _____

6. Worker's Compensation _____

7. Other Taxes **1200.00**

8. Inventory Purchases (Including raw materials) _____

9. Purchase of Feed/Fertilizer/Seed/Spray _____

10. Rent (Other than debtor's principal residence) **6000.00**

11. Utilities **1300.00**

12. Office Expenses and Supplies **6000.00**

13. Repairs and Maintenance **450.00**

14. Vehicle Expenses **100.00**

15. Travel and Entertainment **900.00**

16. Equipment Rental and Leases **1200.00**

17. Legal/Accounting/Other Professional Fees **7500.00**

18. Insurance **2050.00**

19. Employee Benefits (e.g., pension, medical, etc.) _____

20. Payments to Be Made Directly By Debtor to Secured Creditors For Pre-Petition Business Debts (Specify):

DESCRIPTION	TOTAL
Bankers Healthcare Group	2338.00

21. Other (Specify):

DESCRIPTION	TOTAL
Contract fees for billing, accounting, other management services.	10,000.00
Contract fees for chronic pain management & remote patient monitoring services.	38,500.00

22. Total Monthly Expenses (Add items 3-21) \$ **147538.00**

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2) \$ **142.00**